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CERTIFICATE OF FACSIMILE TRANSMISSION  
UNDER 37 CFR §1.8

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted on the date indicated below via facsimile to the United States Patent and Trademark Office, facsimile number (571) 273-8300.

Date: May 8, 2006Marianne Boland  
Marianne Boland

In Re Application of:

*Zellner, et al.*

Confirmation No.: 4937

Group Art Unit: 3622

Serial No.: 09/740,375

Examiner: Duran, Arthur D.

Filed: December 19, 2000

Docket No. 190252-1920

For: Identity Blocking Service from a Web Advertiser

Amendment Transmittal Letter  
Response to Office ActionTotal Pages Transmitted (including cover sheet) - 13

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<b>AMENDMENT TRANSMITTAL LETTER (LARGE)</b>				Docket No.  <b>190252-1920</b>	
Applicant(s) <b>Zelner, et al.</b>					
Serial No. <b>09/740,375</b>	Filing Date <b>December 19, 2000</b>	Examiner <b>Duran, Arthur D.</b>	Confirmation No. <b>4937</b>	Group Art Unit <b>3622</b>	
Invention: <b>Identify Blocking Service from a Web Advertiser</b>					
<b>Commissioner for Patents</b> <b>Mail Stop Amendment</b> <b>P.O. Box 1450</b> <b>Alexandria VA 22313-1450</b>					
Transmitted herewith is a Response to Office Action in the above-identified application.  The fee has been calculated and is transmitted as shown below					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	10 -	20 =	0	X \$50.00	\$0
INDEP. CLAIMS	1 -	3 =	0	X \$200.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$360.00	\$0
EXTENSION FEE	1 <sup>ST</sup> MONTH <input type="checkbox"/> \$120.00	2 <sup>ND</sup> MONTH <input type="checkbox"/> \$450.00	3 <sup>RD</sup> MONTH <input type="checkbox"/> \$1,020.00	4 <sup>TH</sup> MONTH <input type="checkbox"/> \$1,590.00	\$0
Other Fees					\$0
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0</b>
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed. <input type="checkbox"/> A Credit Card Payment Form PTO-2038 is attached in the amount of \$_____. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.</div><div style="text-align: right; width: 30%;"><div style="margin-bottom: 10px;"> Charles W. Griggers, Reg. No. 47,283</div><div style="margin-bottom: 10px;">5-8-06 Date</div></div></div>					

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Docket No. 190252-1920

**RESPONSE TO OFFICE ACTION**

Mail Stop: Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

In response to the non-final office action of February 6, 2006, please consider the following remarks and arguments:

**Listing of the Claims** begin on page 2 of this paper.

**Remarks/Arguments** begin on page 6 of this paper.

**AUTHORIZATION TO DEBIT ACCOUNT**

It is believed that no extensions of time or fees for net addition of claims are required, beyond those which may otherwise be provided for in documents accompanying this paper. However, in the event that additional extensions of time are necessary to allow consideration of this paper, such extensions are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to deposit account no. 20-0778.